

IN THE CLAIMS

Please amend the claims as follows:

Claims 1-53 (canceled)

54. (Currently Amended) A method for ~~treating~~ providing reverse remodeling of a heart having congestive heart failure, comprising:

providing a cardiac harness that is self-sizing;

delivering the cardiac harness to the heart by minimally invasive access;

mounting the cardiac harness on the heart so that the self-sizing harness automatically conforms to the size of the heart;

the cardiac harness providing elastic resistance to stretch during diastole and contractile augmentation during systole; and

decreasing elastic resistance of the cardiac harness as reverse remodeling of the heart occurs.

55. (Previously Presented) The method of claim 54, wherein the cardiac harness maintains elastic, compressive contact with the heart during diastole and systole.

56. (Previously Presented) The method of claim 54, wherein the cardiac harness applies increasing resistive force during diastole.

57. (Previously Presented) The method of claim 54, wherein the cardiac harness is compressible to a relatively low profile delivery diameter so that the harness can be inserted through an opening between the ribs or through subcostal access.

58. (Previously Presented) The method of claim 54, wherein the cardiac harness expands from the relatively low profile delivery diameter to a relatively larger expanded diameter to conform to the circumference of the heart.

59. (Previously Presented) The method of claim 54, wherein the cardiac harness is delivered percutaneously through the skin by a delivery catheter assembly.

60. (Previously Presented) The method of claim 54, wherein the cardiac harness maintains position on the heart without external mechanical fastening.

61. (Currently Amended) A method for treating providing reverse remodeling of a heart having congestive heart failure, comprising:

providing a cardiac harness;

delivering the cardiac harness to the heart by minimally invasive access;

mounting the cardiac harness on the heart so that the harness automatically conforms to the size of the heart; and

the cardiac harness providing elastic resistance to stretch during diastole and contractile augmentation during systole.

62. (Previously Presented) The method of claim 61, wherein as reverse remodeling of the heart occurs, the elastic resistance of the cardiac harness decreases.

63. (Previously Presented) The method of claim 61, wherein the cardiac harness is self-sizing.

64. (Previously Presented) The method of claim 61, wherein the cardiac harness maintains elastic, compressive contact with the heart during diastole and systole.

65. (Previously Presented) The method of claim 61, wherein the cardiac harness applies increasing resistive force during diastole.

66. (Previously Presented) The method of claim 61, wherein the cardiac harness is compressible to a relatively low profile delivery diameter so that the harness can be inserted through an opening between the ribs.

67. (Previously Presented) The method of claim 61, wherein the cardiac harness expands from the relatively low profile delivery diameter to a relatively larger expanded diameter to conform to the circumference of the heart.

68. (Previously Presented) The method of claim 61, wherein the cardiac harness is delivered percutaneously through the skin by a delivery catheter assembly.

69. (Previously Presented) The method of claim 61, wherein the cardiac harness is compressible to a relatively low profile delivery diameter so that the harness can be delivered minimally invasively through subcostal access.

70. (Previously Presented) The method of claim 61, wherein the cardiac harness maintains position on the heart without external mechanical fastening.

71. (Previously Presented) A method for treating the heart, comprising:

providing a cardiac harness;

delivering the cardiac harness to the heart by minimally invasive access;

sliding the cardiac harness over at least a portion of the heart so that the harness conforms to the size of the heart; and

the cardiac harness providing elastic resistance to stretch during diastole and contractile augmentation during systole.

72. (Previously Presented) The method of claim 71, wherein as reverse remodeling of the heart occurs, the elastic resistance of the cardiac harness decreases.

73. (Previously Presented) The method of claim 71, wherein the cardiac harness is self-sizing.

74. (Previously Presented) The method of claim 73, wherein the cardiac harness automatically conforms to the size of the heart.

75. (Previously Presented) The method of claim 71, wherein the cardiac harness maintains elastic, compressive contact with the heart during diastole and systole.

76. (Previously Presented) The method of claim 71, wherein the cardiac harness applies increasing resistive force during diastole.

77. (Previously Presented) The method of claim 71, wherein the cardiac harness is compressible to a relatively low profile delivery diameter so that the harness can be inserted through an opening between the ribs.

78. (Previously Presented) The method of claim 71, wherein the cardiac harness expands from a relatively low profile delivery diameter to a relatively larger expanded diameter to conform to the circumference of the heart.

79. (Previously Presented) The method of claim 71, wherein the cardiac harness is delivered percutaneously through the skin by a delivery catheter assembly.

80. (Previously Presented) The method of claim 71, wherein the cardiac harness is compressible to a relatively low profile delivery diameter so that the harness can be delivered minimally invasively through subcostal access.

81. (Previously Presented) The method of claim 71, wherein the cardiac harness maintains position on the heart without external mechanical fastening.